

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000094109

FILED
Feb 05, 2010
Secretary of State

Entity Name: INJURY TREATMENT CENTER OF FORT MYERS, INC.

Current Principal Place of Business:

8595 COLLEGE PARKWAY
A-2
FORT MYERS, FL 33919

New Principal Place of Business:

8595 COLLEGE PARKWAY
#110
FORT MYERS, FL 33919

Current Mailing Address:

2295 NW CORPORATE BLVD
140
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-1343156 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PRUDEN, JAMES
980 N. FEDERAL HWY
404
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

PRUDEN, JAMES
900 N. FEDERAL HWY
410
BOCA RATON, FL 33432 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 02/05/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: BROWN, GARY
Address: 2295 NW CORPORATE BLVD#140
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY BROWN P 02/05/2010
Electronic Signature of Signing Officer or Director Date